# Mission

AKFC provides quality, comprehensive mental health services for individuals who require a secured treatment setting.



# **Vision**

The Ann Klein Forensic Center envisions high quality, individualized, compassionate and cost effective care and service to severely mentally ill individuals. We will strive to involve all of our staff in providing these services and challenge our staff to continuously improve our services and processes through their individual pursuit of excellence, creativity and innovation. Finally we will strive to become recognized as a national resource in the field of forensic psychiatry and rehabilitation.

# **Ann Klein Forensic Center**

**Annual Report 2018** 



## Introduction

Ann Klein Forensic Center is a 200-bed psychiatric hospital serving a designated New Jersey population. We are a Joint Commission accredited health care facility, one of four psychiatric hospitals governed by the State of New Jersey, Division of Mental Health and Addiction Services.

#### **Values**

We believe in the value, worth, and dignity of our patients, their families, the AKFC staff and each and every customer served by the hospital. We believe that all patients, their families, staff and visitors are entitled to a safe and therapeutic environment.

We believe that our patients and their families should be treated with courtesy, respect and clear professional boundaries.

We believe in a commitment to our staff to provide them with opportunities for their professional growth and development and to create a working environment characterized by fairness, equality, mutual respect and an appreciation of cultural diversity.

We believe in a process of continuous self-monitoring and evaluation in order to improve the level of service and respond to the needs of our customers.

We believe in promoting a culture within the hospital of quality, caring, self-worth, innovation, learning, empowerment and cultural diversity.

# 2018 AKFC Leadership

**Leadership Commitment:** The leaders of this organization are dedicated to patient safety, quality improvement and the prevention of errors to promote optimal patient outcomes in a safe environment. While our leaders recognize the importance of maintenance of performance standards, they are always alert for opportunities to improve. By incorporating performance improvement, inclusive of information from patient safety initiatives, into our personal management style, we serve as role models for the entire organization. In addition, leadership has a responsibility to create an environment to facilitate employee involvement in patient safety and performance improvement.

### **INSTITUTIONAL EXECUTIVE STAFF**

David Kensler, Chief Executive Officer
Linda Elias, Deputy CEO-Clinical Services
Karen Alloway, Deputy CEO-Support Services
Dr. Elizabeth Hogan, Medical Director
Joyrie Bowen, Director of Nursing
Reed Gladey, Program Specialist 4
Anne Kenyon, Human Resources Director
Kim Effing, Director of Quality Improvement
Leon Alexander, Information Technology Director
Carletha Murray, Business Manager
Charles Moore, Employee Relations
Dianah Savage, Program Specialist 4

# ANN KLEIN FORENSIC CENTER CURRENT COMPLIANCE: JOINT COMMISSION TRIENNIAL REVIEW FOLLOW-UP

- Observation of precaution patients = 100%
- ❖ Ligature points / plastic trash bags in facility = 100%
- ❖ Patient observation documentation (every 15 minutes) = 96%
- ❖ Allergy documentation = 100%
- ❖ Treatment Plan modification after emergency safety measure (S&R) = 85%
- ❖ Medication Room refrigerator log documentation completion = 100%
- ❖ Medication Room refrigerator defrosting documentation completion = 100%
- **❖** Labeling multi-dose injectable medication vials = **100**%
- ❖ Disposal of expired medications = 99%
- ❖ Fire alarm testing devices listed individually on inventory = 100%
- ❖ Weekly inspection of eyewash stations = 100%
- ❖ Fire drill compliance / fire alarm breaker red = 100%
- ❖ Manual stop for emergency generator = 100%
- ❖ Electrical junction box compliance = 100%
- ❖ Fuel quality testing = 100%
- ❖ Medical staff OPPE completion = 100%
- ❖ Treatment Plans include short & long term goals = 100%
- Translation utilization documentation = 77%

## **Hospital-wide Safety Initiatives**

- ❖ 15 minute checks of every patient by MSOs
- Joint Security and Nursing rounds
- Administrative Rounds
- ProActive Therapeutic Team (PATT)
- ❖ Literature review and practices in other states thru NASPMHD Forensic Division
- ❖ Medical Director visited Alabama Forensic Center consultation
- ❖ Received SAMHSA Trauma Informed Care grant
- Culture of Safety Survey to all staff
- Purchased digital radios to enhance communication
- Consultations with outside contractors
- ❖ Mock Surveys and just-in-time training
- Eliminated net restraints

## Environmental ligature risk mitigation:

- ❖ 200 ligature resistant bed frames and 164 patient desk stools and replaced
- \* Retrofitted sinks to be ligature resistant
- Replaced door handles to courtyard and foyer with flush cups
- Replaced all traditional telephones in patient units with ligature resistant telephones
- \* Removed deodorizer dispensers in Rehab patient restrooms
- Installed flush plates and pull cups on door handles to laundry and storage rooms
- Replaced soap dispensers
- Sealed wall light fixtures in Rehab Quiet Rooms and electrical raceways in Unit foyers
- Eliminated plastic bags in Sheltered Workshop to mitigate risk
- Eliminated use of plastic garbage bags and replaced with paper bags
- ❖ Removed and/or replaced all unsecure cords in Rehab

# **AKFC Departmental Highlights**

#### **REHABILITATION SERVICES**

**Community Connections**: A total of 7 different live bands were hired throughout the year to perform for our patients, covering R&B, Jazz, Pop, and Rock.

Black History month (February) was celebrated with a workshop and performance by "Universal African Dance and Drum Ensemble" out of Camden NJ. Patients and staff were treated to a highly professional show including dance performance, and instructional lessons on the cultural history of Drum and Dance.

The Music Ambassadors from Princeton Theological Seminary came to AKFC to provide music for the Protestant service. The musician played music while Pastor Mike preached the service.

#### **Recreation Department**

The year began with providing our patients with a McDonalds Snack on New Year's Day. All patients were treated to two cheeseburgers, and an apple pie. Patients with special diets were given appropriate substitute snacks.

On February 4<sup>th</sup>, patients were able to watch the Super Bowl on their Units. Chips and juice were provided as snacks during the game.

The Recreation department also organized the Summer cookouts in the yard. June 5<sup>th</sup> lunch was prepared and served in the recreation yard; menu included: hamburgers, hotdogs, turkey sausage, salads, veggie beans, sodas and fruit for dessert. July 10<sup>th</sup> and August 7<sup>th</sup> were Hoagie Days. Patients had their choice of hoagies prepared by staff as they came through the line, as well as Soda and ice-cream for dessert. The final Summer cookout, Hotdog Snack Day, was postponed until October. Patients participated in a variety of activities including, volleyball, basketball, line dancing, and Frisbee throw, while snacking on hotdogs and chips. During each Summer event music was provided by DJ Swell.

Recreation's Unity room provided puzzles, coloring pictures and greeting cards monthly in celebration of the different Holidays, such as, Valentine's Day, St. Patrick's Day, Easter, etc. Patients are given the opportunity to create homemade individual cards to send to family and friends.

The Gymnasium program provided monthly tournaments and competitions, including ping pong, basketball, volleyball, bowling, Frisbee throw and exercise routines. Patients received prizes such as designed T-shirts, certificates, socks, and hygiene products. The Gymnasium group also set up the screen TV to allow patients the opportunity to watch March Madness (College Basketball Tournaments), International Soccer World Cup, Wimbeldon Tennis Tournament and US Tennis Opens.

New wall mats were purchased and installed to replace the old worn out mats in the Gymnasium.

#### **Occupation Therapy/Education Department**

Reasoning group held their second Olympic Games. Various gross motor activities and games were played each day for one week. "Metals" were given to all participating athletes. The Reasoning and Arts & Crafts groups are conducted by Principle Occupational Therapist Maryrose Mielczarek. These groups provide monthly decorations for the lobby's display case, and designed a bulletin board during Black History month (February) and LGBT month (June) with pictures of prominent past and present Heroic figures. Maryrose also

provides open leisure groups on Units 1 and 2, targeting patients who are not able to attend Rehab. or TAP. She introduced Aroma therapy to the Units with the use of scented soap. This was a hit with a few patients on these Units 1.

The Horticultural group continued to plant flower pots that are displayed at the AKFC front door during the Summer and end of Fall seasons. They also put together flower arrangements every week for every Rehab. classroom. The group grew flowers along with tomatoes, cucumbers, peppers, eggplants and various herbs. The patients used the produce for many cooking activities including making pickles and pizza. Horticulture designed a bulletin board in the Rehab. hallway with holistic coping strategies (Medication, Aroma therapy, relaxation techniques).

Life Management group collaborated with the Mindfulness group to put on a patient coffeehouse, which showed the benefits of Poetry & Mindfulness. Patients demonstrated how to body scan, deep breathe and read poetry. These two groups also collaborated to have an end of Summer "Campfire". The event was patient initiated. The campfire was filled with sensory-based mindfulness meditation and spiritual/folk songs. Both group leaders played their Ukuleles as patients sang together around a faux fire. Patients made crafts to look like fire wood, ember and a fire pit. To promote engagement and improve overall mood, a battery operated plastic projector was use to project stars and the moon over the ceiling. Patients were really focused on the therapeutic appearance.

Our two Art Therapists continue to have great participation in Art Therapy (Amy Costigan) and Art Studio (Carol Pletnick). Their groups also provided Art projects to be displayed in the front Lobby and throughout the Rehab. Wing. Carol and Chaplain Alexandra Van Kuiken organized a hospital wide patient and staff Peace Crane activity. One thousand cranes folded by patients and staff were completed and displayed in the window outside the Director of Rehab's office and in the Lobby's display case.

Carol Pletnick and Amy Costigan organized and implemented the TAMAR group for our female patients.

Principle Occupational Therapist (Sandy Everett) and Art Therapist (Carol Pletnick) created the Comfort on Wheels (COW) cart. The cart carries therapeutic modalities to be utilized by patients to help reduce aggression and promote self-regulatory behavior following an assessment. Rehab. staff introduced the COW through an in-service and began use on the female Unit 1.

The TAP program continues to have success in transitioning patients to regular Rehab programs. Morning sessions are conducted on Units 3 or 4, and the afternoon sessions are conducted in the Rehab wing's TAP room. The group held their version of the Winter Olympics with teams and individual competition. Olympics began by picking teams and creating colored T-shirts which were worn during the various competitions. Events included: Team volleyball, Snowball relays, individual basketball shoot, soccer ball course and elimination volleyball. The opening ceremony included passing of the Olympic torch from player to player. During the closing award ceremony the Olympians received Gold, Silver, and Bronze medals made of paper. Olympians were treated to a small reception with pretzels, nuggets and juice. They were given the opportunity to have their picture taken with their awards.

Music Therapy lost Christian Lawless to the Vocational Rehab. Department. However, Alyssa Gonzalez was hired and immediately displayed her creative talents. She was well received by our patients. She continued the Unit 2 open music group during the first period. She has also collaborated with Chaplain Walter to provide music sing a long on Unit 1 for the females.

Student Program: Included eight OT students and two COTA. students from many colleges and universities, such, as Thomas Jefferson, Philadelphia, Harcum, Stockton, Temple, Elizabethtown, and Misericordia.

Education classrooms continued with qualified licensed Teachers conducting Adult basic education, SFEA (under 21), computer skills, book club and specific patient interests. There were also graduation celebrations for two successful High School graduates. There were three IEP meetings for SFEA students with a representative from the office of Education and family members. A new computer and printer were provided for patients in both classrooms by our IT department.

#### **Chaplain Services**

The Chaplain department offered patient care through individual pastoral counseling, group leadership, responding to referrals, involvement with treatment teams, presence on weekly team rounds, visiting patients when in the hospital, and individual grief counseling requested by Treatment Teams. The Spanish Spirituality group began with assistance from Amailia Adame (Social Worker/Interpreter).

Part Time Chaplain Walter De Gunya was hired as a full time Chaplain. He has collaborated with other Rehab. staff in providing special events such as, the coffee house, campfire, and sing-a-long on Unit 1.

Chaplain Ali and Walter have conducted three memorial services for patients who passed away. They also provided grief counseling to our patients during this time and visited patients while in the hospital.

Chaplain services continue with internships, with two interns from the Princeton Theological Seminary.

There are continued contracted services from outside contractors providing religious services in the following denominations: Judaism, Roman Catholicism, Protestantism, Islam, and a Bi-weekly Spanish Catholic Service.

The Chaplains were successful coordinating with dietary and Treatment Teams to ensure fasting for Ramadan and Yom Kippur was therapeutic and could occur according to religious requirements. At the conclusion of Ramadan Imam Shalaby hosted the feast of Eid Al-Fitr for the patients participating in Ramadan and the regular participants in the Islamic services.

The Chaplain led special hospital-wide services for Easter. Other Holiday services included: 4 Jewish, 6 Islamic, Diwali celebration, Hindi New Years, and Ash Wednesday in which patients and staff were given the opportunity to receive ashes.

#### **Vocational Rehabilitation Department**

Nichele Laramore was hired as the Supervisor of Rehab Counselors after the retirement of Donna Downs.

Voc. Rehab continues to have success in their Patient Worker Program (PWP), with workers in the Laundry, Our Store, and Foremen in the Workshop.

The Workshop (piece rate) program continues to adhere to the Department of Labor's required criteria of minimum wage for all workers. Staff continue to assist and train patients to maintain a good level of participation.

The department implemented a new Quality control system to account for plastic bags used in the program. Twenty bags are given out to patients as they start work and each patient will get additional bags once the first twenty are used. This gives staff the ability to have more accountability for the bags.

Christian Lawless was hired into the open Sr. Vocational Rehab Counselor position.

#### **Substance Abuse**

Substance Abuse Counselor Fred Bull continues individual and group counseling through referrals and interest from patients. Group sessions are conducted weekly during the morning, afternoon and evening hours. Literature such as books and pamphlets are utilized for patients and were also provided in the Library for patients' use.

Outside Volunteers continue to provide Double Trouble and NA meetings for interested patients.

Mr. Bull continues to search for additional outside services willing to come into our facility.

#### **PSYCHOLOGY**

#### Reduction of Violence and Need for Seclusion and Observation:

• In 2018, the main goals of the Psychology Department included reducing violence among patients (inflicted upon themselves and others) and addressing other problematic behaviors that prevent patients from being transferred to less restrictive settings and, eventually, into community placements.

In moving toward these goals, the Psychology Department has implemented a Behavioral Intervention Program, which is run by a Behavioral Team comprised of a Behavior Analyst and two Behavior Support Staff members. Our primary emphasis has been on Intensive Treatment Unit (ITU) areas in the male and female units, directing behavioral interventions to gradually reduce and/or eliminate Seclusion and Observation (S & O) orders. The data that we have obtained suggest that, in many instances, a patient's undesired behaviors have been substantially reduced following behavioral intervention. In the near future, we are hoping to hire an additional Behavior Support Staff member, which would enable us to expand the reach of the Behavioral Intervention Program to a larger number of our patients.

#### **Expansion of Competency Restoration Treatment Program:**

• Competency restoration is a major concern of forensic hospitals, jails, and courts. More rapid restoration helps facilitate timely legal determinations for defendants with mental illness. Psychotropic medications and competency restoration programs are important options used for competency recovery in the US. The Competency Restoration Treatment Program at Ann Klein consists of 23 lessons and involves ~4 months of training. Through the end of 2017, we had only two trained psychologists administrating the program. However, in 2018, courts increasingly ordered the inclusion of offenders in the program. At times, this resulted in a prolonged waiting list and significant delays to offenders' participation. To address this issue, the Department has decided to train the entire psychology staff to be able to run the program. At present, Dr. A Strathern, one of the co-developers of the program, is providing the required training to one psychologist, who will in turn train other psychologists. The new process will allow us to simultaneously run multiple groups and help avoid the unnecessary delay of services.

#### **SOCIAL WORK**

The Social Work Department at the Ann Klein Forensic Center consists of ten (10) social workers, two (2) of whom are bi-lingual and a Social Work Supervisor. Social Worker's duties and responsibilities include:

- Completing biopsychosocial assessments on all patients. The social worker gathers and assesses data from the consumer, family agencies and significant others. They assesses ethnic and cultural factors that influence the delivery of mental health services.
- Provide direct clinical social work services by maintaining the therapeutic relationship with assigned consumers. Social Workers provide psychotherapy and psychoeducation to individuals and groups, to reduce psychosocial issues.
- As a member of an interdisciplinary Treatment Team, social workers participate with the consumer in the formulation of goals, objectives, and interventions. They present social work recommendations for planned treatment interventions to promote the well-being of the consumer.
- Social Workers write weekly and/or monthly progress notes document the effectiveness of interventions and the consumer's progress towards meeting treatment goals.
- As much as possible, the social worker promotes the consumer's right to self-determination in discharge planning. The social worker will identify the consumer's needs and potential barriers to discharge.
- Social workers maintains communications with families, courts, ICMS, Pact Team and other agencies. They advocate for the consumer to ensure continuity of care upon discharge.
- Social Workers apply their awareness of community resources when assisting consumers in discharge and aftercare planning.

#### **Linguistics:**

The Linguistic Service Department is providing training to all the disciplines in the forensic center. The
goal of the training is to foster cultural sensitivity, to be aware of our differences and accept them
instead of minimizing them. The goals are to provide appropriate linguistic services at the level needed
to maintain effective communication, and respect a patient's right to speak in their preferred
language.

Bilingual social workers identified interfaces between staff and patients where linguistic services were crucial for mental health services to be delivered successfully. A 'Tracer' was developed to ascertain if consumer needs were being met. Those areas needing improvement were identified and a concerted effort, still on going, has been made to improve in these areas.

#### **Therapy Groups:**

Social Workers pioneered new psychotherapy groups this year: Start Now, Communications Group,
Less Restrictive Discharge Prep, and Circles I & II. A Co-occurring Disorder group will begin in
November. The bi-lingual social workers facilitate the following groups: Musica (Music), Dinamico
(Dynamic) Holistic Group and Abuse de Substancias (Substance Abuse). Additionally they facilitate a
Competency Group in partnership with the psychology department.

#### **NURSING**

As part of AKFC restructuring efforts, regarding the opening of the doors, Nursing has reviewed their operations to determine new departmental needs. Some needs that were identified and are being addressed are:

- 1. Increase in Operational Standard: The Nursing Department increased its operational standard from 13 on the Day/Evening Shift and nine on the Night Shift, to 18 on the Day/Evening Shift and 12 on the Night Shift. An additional nurse was added to seven of the eight units on the Day and Evening Shift and three of the units on the Night Shift. The increase in staffing is in support of the hospital's new vision to have more clinical staff engagement with patients. It enables Nursing Staff to be more actively involved with their patients, by increasing their presence on the units/Centers and Rounding more often. It also enhances the collaborative efforts between the nurses and officers.
- **2. Nursing Recruitment:** Sixteen (16) nurses were hired since the beginning of 2018, which include nine full time and seven per diem nurses. Recruitment efforts continues, with interviews conducted every month.
- **3.** Revised Policies/Audit Forms: Several policies were revised to comply with The Joint Commission (TJC) plan of correction. Revised policies include but were not limited to:
  - ➤ Policy #700.15 "Maintenance and Monitoring of Medication and Nutrition Refrigerators" to address the frequency of refrigerator defrosting. New refrigerators were also purchased for all units to be in compliance with recommended standards.
  - ➤ Policy # 700.1 "Medication Administration Procedure" to address the process of labeling all stored medications and preparation components.
  - ➤ Policy #700.13 & #700.14to include checking for expired, unused or damaged medications in other areas where meds are stored but not accessed on a routine basis.

Audit forms for the Medication Rooms, Medical Clinic and the Admission Room were revised to include all policy updates.

- **4. Training:** Sustained communication and education through Staff Meetings and in-services about new/revised policies, clarification of new process and new performance requirement goals.
- **5. Staff Development**: Nurses are encouraged to pursue higher education and seven nurses received their BSN this year.

#### **PROGRAM COORDINATORS**

- Implemented a new Treatment Plan format to ensure compliance with Joint Commission standards and to improve the treatment planning process focused on transitioning patients to the least restrictive level of care as soon as possible.
- Formalized Morning Team Meetings on each unit to improve handoff communication.
- Implemented Community Meetings on each unit to increase patient input.